

Fill in this information to identify the case:Debtor name **AFFORDABLE PATIOS & SUNROOMS**United States Bankruptcy Court for the: DISTRICT OF NEVADACase number (if known) **20-50017**☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

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An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 21, 2020****X /s/ RICHARD G. TAYLOR**_____
Signature of individual signing on behalf of debtor**RICHARD G. TAYLOR**_____
Printed name_____
Position or relationship to debtor

Fill in this information to identify the case:Debtor name **AFFORDABLE PATIOS & SUNROOMS**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **20-50017**☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

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Part 1: Summary of Assets**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **191,377.00****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **191,377.00****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **0.00****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **961,332.26****4. Total liabilities**
Lines 2 + 3a + 3b\$ **961,332.26**

Fill in this information to identify the case:Debtor name **AFFORDABLE PATIOS & SUNROOMS**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **20-50017**☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

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Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **NEVADA STATE BANK****CHECKING****\$0.00****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.00**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. Accounts receivable

11a. 90 days old or less:

9,883.00

-

0.00

=

\$9,883.00

face amount

doubtful or uncollectible accounts

Debtor **AFFORDABLE PATIOS & SUNROOMS**
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11a. 90 days old or less:	<u>15,652.00</u>	-	<u>0.00</u>	=	<u>\$15,652.00</u>
	face amount		doubtful or uncollectible accounts		

11a. 90 days old or less:	<u>19,871.00</u>	-	<u>0.00</u>	=	<u>\$19,871.00</u>
	face amount		doubtful or uncollectible accounts		

11a. 90 days old or less:	<u>12,491.00</u>	-	<u>0.00</u>	=	<u>\$12,491.00</u>
	face amount		doubtful or uncollectible accounts		

11a. 90 days old or less:	<u>23,486.00</u>	-	<u>0.00</u>	=	<u>\$23,486.00</u>
	face amount		doubtful or uncollectible accounts		

11a. 90 days old or less:	<u>9,509.00</u>	-	<u>0.00</u>	=	<u>\$9,509.00</u>
	face amount		doubtful or uncollectible accounts		

11a. 90 days old or less:	<u>16,000.00</u>	-	<u>0.00</u>	=	<u>\$16,000.00</u>
	face amount		doubtful or uncollectible accounts		

11a. 90 days old or less:	<u>19,800.00</u>	-	<u>0.00</u>	=	<u>\$19,800.00</u>
	face amount		doubtful or uncollectible accounts		

11a. 90 days old or less:	<u>21,181.00</u>	-	<u>0.00</u>	=	<u>\$21,181.00</u>
	face amount		doubtful or uncollectible accounts		

11a. 90 days old or less:	<u>31,304.00</u>	-	<u>0.00</u>	=	<u>\$31,304.00</u>
	face amount		doubtful or uncollectible accounts		

12. Total of Part 3.

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$179,177.00**Part 4: Investments****13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

General description**Date of the last
physical inventory****Net book value of
debtor's interest
(Where available)****Valuation method used
for current value****Current value of
debtor's interest**

Debtor **AFFORDABLE PATIOS & SUNROOMS**

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19. **Raw materials**

20. **Work in progress**

21. **Finished goods, including goods held for resale**
6 GAS STOVES **\$0.00** **\$6,000.00**

22. **Other inventory or supplies**23. **Total of Part 5.****\$6,000.00**

Add lines 19 through 22. Copy the total to line 84.

24. **Is any of the property listed in Part 5 perishable?**☒ No☐ Yes25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**☒ No☐ Yes. Book value

Valuation method

Current Value

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**☒ No☐ Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**☒ No. Go to Part 7.☐ Yes Fill in the information below.**Part 7: Office furniture, fixtures, and equipment; and collectibles**38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☐ No. Go to Part 8.☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture DESKS, CHAIRS AND OFFICE FURNITURE	\$0.00		\$200.00

40. **Office fixtures**41. **Office equipment, including all computer equipment and communication systems equipment and software**42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles43. **Total of Part 7.****\$200.00**

Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**☒ No☐ Yes

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45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. 2015 MOSSIMO UTILITY VEHICLE	\$0.00		\$4,000.00
47.2. 2014 DUMP TRAILER	\$0.00		\$2,000.00

48. **Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels49. **Aircraft and accessories**50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$6,000.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☒ No. Go to Part 11.
☐ Yes Fill in the information below.

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.

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debtor's interest

71. **Notes receivable**
Description (include name of obligor)
72. **Tax refunds and unused net operating losses (NOLs)**
Description (for example, federal, state, local)
73. **Interests in insurance policies or annuities**
74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**
76. **Trusts, equitable or future interests in property**
77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*
CLAIM AGAINST NEVADA CONTRACTORS BOARD FOR WRONGFULLY PROHIBITING COMPLETION OF EXISTING JOBS

Unknown**RECYCLABLE ITEMS**Unknown

78. **Total of Part 11.**
Add lines 71 through 77. Copy the total to line 90.
79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**
☒ No
☐ Yes

\$0.00

Debtor **AFFORDABLE PATIOS & SUNROOMS**
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In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$179,177.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$6,000.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$200.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$6,000.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$191,377.00	\$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$191,377.00

Fill in this information to identify the case:

Debtor name **AFFORDABLE PATIOS & SUNROOMS**

United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) **20-50017**

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

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Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☐ Yes. Fill in all of the information below.

Fill in this information to identify the case:Debtor name **AFFORDABLE PATIOS & SUNROOMS**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **20-50017**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

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Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address INTERNAL REVENUE SERVICE P.O. Box 7346 Philadelphia, PA 19101-7346 Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00 \$0.00

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim
3.1 Nonpriority creditor's name and mailing address ALEXCIS AND MARSHA RAJ 10850 LONGHORN DRIVE Reno, NV 89508 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: BUSINESS DEBT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$25,000.00
3.2 Nonpriority creditor's name and mailing address ARRON AND CYNAMON HEIDE 5740 RIVER BIRCH DRIVE Reno, NV 89511 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: BUSINESS DEBT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$2,969.00

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3.3	Nonpriority creditor's name and mailing address AUDREY HAUG 15 ECLIPSE DRIVE Sparks, NV 89441 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$37,003.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.4	Nonpriority creditor's name and mailing address BECKER FAMILY TRUST 8510 SPEARHEAD WAY Reno, NV 89506 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$29,771.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.5	Nonpriority creditor's name and mailing address BECKY ELLIS 9528 XANTHOS LANE Reno, NV 89521 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$25,723.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.6	Nonpriority creditor's name and mailing address BRIAN R. TRUSLER Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.7	Nonpriority creditor's name and mailing address CHEN KWOK 275 WEST STREET Reno, NV 89501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$60,771.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BREACH OF CONTRACT CLAIM</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.8	Nonpriority creditor's name and mailing address CHERIE HALVERSON 5370 ETHEL WAY Carson City, NV 89701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$11,871.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.9	Nonpriority creditor's name and mailing address DAN LUCK 18516 SILVERBELL COURT Reno, NV 89508 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$17,254.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.10	Nonpriority creditor's name and mailing address DAVID HENNESSY 1235 CLIFF PARK WAY Reno, NV 89523 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,235.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.11	Nonpriority creditor's name and mailing address DIANE RUDNICK 1023 HERNDON TRAIL Reno, NV 89523 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,471.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.12	Nonpriority creditor's name and mailing address EMELY SITKOFF 2413 NAPOLI DRIVE Sparks, NV 89434 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$14,944.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.13	Nonpriority creditor's name and mailing address FOUR SEASONS SUNROOMS 5005 VETERANS MEMORIAL HIGHWAY Holbrook, NY 11741 Date(s) debt was incurred <u>11/2019</u> Last 4 digits of account number <u>8150</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$29,617.12 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.14	Nonpriority creditor's name and mailing address FRANK LETO 1083 TAZEWELL TRAIL Reno, NV 89523 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,900.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.15	Nonpriority creditor's name and mailing address GARY HOCKENSON 11765 MISTLETOE STREET Reno, NV 89506 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$35,994.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.16	Nonpriority creditor's name and mailing address GLENN AND BONNIE DODD 1555 CANTINIA DRIVE Sparks, NV 89436 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$16,268.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **AFFORDABLE PATIOS & SUNROOMS**
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3.17	Nonpriority creditor's name and mailing address GLORIA RUDNICK Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.18	Nonpriority creditor's name and mailing address GREGORY WESTMORELAND Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.19	Nonpriority creditor's name and mailing address JAMIE MCDONALD 5929 SOLSTICE DRIVE Sparks, NV 89436 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,871.00
3.20	Nonpriority creditor's name and mailing address JIM AND CYNDY WHITE 4795 CRESTSIDE DRIVE Sparks, NV 89436 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,327.00
3.21	Nonpriority creditor's name and mailing address JIM AND KELLY MCDANIELS 14320 QUIET MEADOW DRIVE Reno, NV 89511 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,393.00
3.22	Nonpriority creditor's name and mailing address JOE AND STACY ZEIGLER 3034 10 MILE DRIVE Sparks, NV 89436 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,783.00
3.23	Nonpriority creditor's name and mailing address JOHN COSSAVELLA 445 KATHY TERRACE Sparks, NV 89436 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,122.60

Debtor **AFFORDABLE PATIOS & SUNROOMS**Case number (if known) **20-50017**

Name

3.24 Nonpriority creditor's name and mailing address

JOHN D. MOORE
MOORE LAW GROUP, PC
3715 LAKESIDE DRIVE, SUITE A
Reno, NV 89509

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **LEGAL SERVICES**Is the claim subject to offset? ☒ No ☐ Yes**Unknown**

3.25 Nonpriority creditor's name and mailing address

JOHN MCDONNELL
2946 E. NASHUA PLACE
Sparks, NV 89436

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **BUSINESS DEBT**Is the claim subject to offset? ☒ No ☐ Yes**\$13,471.00**

3.26 Nonpriority creditor's name and mailing address

JOHN TALKINGTON
4850 BRYCE DRIVE
Carson City, NV 89706

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **BUSINESS DEBT**Is the claim subject to offset? ☒ No ☐ Yes**\$26,108.00**

3.27 Nonpriority creditor's name and mailing address

JOSEPH ZEIGLER

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **BUSINESS DEBT**Is the claim subject to offset? ☒ No ☐ Yes**\$0.00**

3.28 Nonpriority creditor's name and mailing address

JUAN RODRIGUEZ
10696 FOXBERRY PARK DRIVE
Reno, NV 89521

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **BUSINESS DEBT**Is the claim subject to offset? ☒ No ☐ Yes**\$16,756.00**

3.29 Nonpriority creditor's name and mailing address

KAPITUS SERVICING
2500 DISCOVERY BLVD., SUITE 200
Rockwall, TX 75032

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **BUSINESS DEBT**Is the claim subject to offset? ☒ No ☐ Yes**\$17,986.00**

3.30 Nonpriority creditor's name and mailing address

KATE HANLON
1413 SNOW SUMMIT DRIVE
Reno, NV 89523

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **BUSINESS DEBT**Is the claim subject to offset? ☒ No ☐ Yes**\$18,465.00**

Debtor **AFFORDABLE PATIOS & SUNROOMS**
NameCase number (if known) **20-50017**

3.31	Nonpriority creditor's name and mailing address KENT ELLIOTT 2875 SAVONA DRIVE Sparks, NV 89434 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,327.00
3.32	Nonpriority creditor's name and mailing address LANA SCOLARI 820 LAGUARDIA LANE Reno, NV 89511 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,571.00
3.33	Nonpriority creditor's name and mailing address LEATHERS Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.34	Nonpriority creditor's name and mailing address LESLIE EVERETT ZIMMERMAN 906 BATES AVENUE Reno, NV 89502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,486.00
3.35	Nonpriority creditor's name and mailing address LEWIS AND DAWN BREGNI 9211 SASSAFRASS TRAIL Reno, NV 89523 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,774.00
3.36	Nonpriority creditor's name and mailing address LEWIS WALTER MATTICE 11455 VERAZAE DRIVE Reno, NV 89521 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.37	Nonpriority creditor's name and mailing address LORRIE HERN 9517 TENCENDUR LANE Reno, NV 89521 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,937.00

Debtor Name	AFFORDABLE PATIOS & SUNROOMS	Case number (if known)	20-50017
3.38	Nonpriority creditor's name and mailing address MATTHEW AND DEBORAH WOOD 1251 HEYBOURNE ROAD Gardnerville, NV 89410 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,755.00
3.39	Nonpriority creditor's name and mailing address MONIQUE FESTINESE C/O HEATHER A. IJAMES, ESQ. LAW OFFICE OF HEATHER A. IJAMES 63 KEYSTONE AVENUE, SUITE 101 Reno, NV 89503 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,189.60
3.40	Nonpriority creditor's name and mailing address NEVADA STATE CONTRACTORS BOARD 5390 KIETZKE LANE, SUITE 102 Reno, NV 89511 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.41	Nonpriority creditor's name and mailing address NORMAN HUCKLE 2970 IDLEWILD DRIVE Reno, NV 89519 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,809.00
3.42	Nonpriority creditor's name and mailing address O.S.R. 5005 VETRANS MEMORIAL HIGHWAY Holbrook, NY 11741 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.43	Nonpriority creditor's name and mailing address PAUL AND KARIN QUINONES 1169 BARN OWL DRIVE Sparks, NV 89436 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,997.00
3.44	Nonpriority creditor's name and mailing address PAUL GRAY GILBERT 493 BECKWOURTH DRIVE Reno, NV 89506 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,671.00

Debtor Name	AFFORDABLE PATIOS & SUNROOMS	Case number (if known)	20-50017
3.45	Nonpriority creditor's name and mailing address RENO PATIO AND FIREPLACE, LLC 69 SUNSHINE LANE Reno, NV 89502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>DELINQUENT RENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,000.00
3.46	Nonpriority creditor's name and mailing address RICHARD HILL P.O. BOX 2551 Reno, NV 89505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ATTORNEYS FEES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.47	Nonpriority creditor's name and mailing address RICHARD SINTDENIF 2751 KENSINGTON PLACE Carson City, NV 89703 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,136.94
3.48	Nonpriority creditor's name and mailing address RICHARD TAYLOR 910 GLENDALE AVE. Sparks, NV 89431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.49	Nonpriority creditor's name and mailing address RL ENGINEERING 675 Fairview Dr #205 Carson City, NV 89701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.50	Nonpriority creditor's name and mailing address ROBB AND CAROL CHAMBERS 17915 SUNSET PEAK COURT Reno, NV 89508 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,998.00
3.51	Nonpriority creditor's name and mailing address ROBERT F. LAUDER, P.E. RL ENGINEERING 625 FAIRVIEW DRIVE #112 Carson City, NV 89701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ENGINEERING SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,285.00

Debtor **AFFORDABLE PATIOS & SUNROOMS**Case number (if known) **20-50017**

Name

3.52	Nonpriority creditor's name and mailing address SAM AND MARY HICKMAN 5062 KIVA COURT Sparks, NV 89436 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,871.00
3.53	Nonpriority creditor's name and mailing address SCOTT AND EDITH SANDBERG 6040 W. HIDDEN VALLEY DRIVE Reno, NV 89502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,671.00
3.54	Nonpriority creditor's name and mailing address SHANE BILLAU 5385 TANNERWOOD DRIVE Reno, NV 89511 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,246.00
3.55	Nonpriority creditor's name and mailing address SPECTRUM 8413 EXCELSIOR DRIVE, SUITE 120 MADISON, WI 53717-1970 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ADVERTISING</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.56	Nonpriority creditor's name and mailing address STACIE SELMI 2255 CHAROLAISE DIRCLE Sparks, NV 89431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,228.00
3.57	Nonpriority creditor's name and mailing address STEVE ROMERO 2602 SWEET CLOVER COURT Minden, NV 89423 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$46,917.00
3.58	Nonpriority creditor's name and mailing address SUE KOZAK 160 CARSON RIVER DRIVE Dayton, NV 89403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$47,809.00

Debtor **AFFORDABLE PATIOS & SUNROOMS**
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3.59	Nonpriority creditor's name and mailing address TAMMY POTTER 1795 WABASH CIRCLE Sparks, NV 89434 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,871.00
3.60	Nonpriority creditor's name and mailing address TERESA SNAZA 7641 DEVONSHIRE LANE Reno, NV 89511 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,871.00
3.61	Nonpriority creditor's name and mailing address TIMOTHY AND DENISE STIGER 20972 WHITE ROCK DRIVE Reno, NV 89508 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,457.00
3.62	Nonpriority creditor's name and mailing address TODD KOPPER 4765 WONDERSTONE DRIVE Sparks, NV 89436 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,446.00
3.63	Nonpriority creditor's name and mailing address TODD STIGEN Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.64	Nonpriority creditor's name and mailing address TOM ROGERS 2089 MARCUS WAY Sparks, NV 89436 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,271.00
3.65	Nonpriority creditor's name and mailing address TRACEY AND LEROY REAY 208 RAY MAY WAY Gardnerville, NV 89410 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,871.00

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3.66	Nonpriority creditor's name and mailing address TRI STATE DISTRIBUTORS, INC. PO BOX 3623 Spokane, WA 99220-3623 Date(s) debt was incurred <u>5/2019</u> Last 4 digits of account number <u>5000</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,201.00
3.67	Nonpriority creditor's name and mailing address TRIAN TRUSLER 205 SILVER HORSE ROAD Reno, NV 89510 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,078.00
3.68	Nonpriority creditor's name and mailing address WALT AND GAYLE MATTICE 11455 VERAZAE DRIVE Reno, NV 89521 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,378.00
3.69	Nonpriority creditor's name and mailing address WAYNE RIGBY 1266 BELLATRIX WAY Sparks, NV 89441 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BUSINESS DEBT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$57,136.00

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	MONIQUE FESTINESE 3347 POCO REY COURT Sparks, NV 89436	Line <u>3.39</u> <input type="checkbox"/> Not listed. Explain <u> </u>	<u> </u>

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Total of claim amounts</div>
5a. Total claims from Part 1	5a. \$ <u>0.00</u>
5b. Total claims from Part 2	5b. + \$ <u>961,332.26</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> 5c. \$ <u>961,332.26</u> </div>

Fill in this information to identify the case:Debtor name **AFFORDABLE PATIOS & SUNROOMS**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **20-50017**☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15****Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease****2.1** State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

Fill in this information to identify the case:Debtor name **AFFORDABLE PATIOS & SUNROOMS**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **20-50017**☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

- ☐ D
☐ E/F
☐ G

2.1

Street

City State Zip Code

2.2

Street

City State Zip Code

- ☐ D
☐ E/F
☐ G

2.3

Street

City State Zip Code

- ☐ D
☐ E/F
☐ G

2.4

Street

City State Zip Code

- ☐ D
☐ E/F
☐ G